

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  16D0383214	<b>(X3) Date Survey Completed</b>  08/30/2023
<b>Name of Provider or Supplier</b>  Mercyone Clive Clinics	<b>Street Address, City, State</b>  1601 Nw 114th Street, Clive, IA	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D2009</b>	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing (PT) records and confirmed by laboratory personnel identifiers #3 and #4 (refer to the Laboratory Personnel Report) at 10:15 am on 08/30/2023, the laboratory director failed to attest to the routine integration of PT samples into the patient workload for four out of five PT events from 01/01/2022 - 08/30/2023. The findings include: 1. For 2022 event 2, the laboratory director did not sign the following PT attestation statements: immunology/immunochemistry and microbiology. 2. For 2022 event 3, the laboratory director did not sign the following PT attestation statement: microbiology. 3. For 2023 event 1, the laboratory director did not sign the following PT attestation statements: immunology /immunochemistry, core chemistry, miscellaneous chemistry, hematology /coagulation, and microbiology. 4. For 2023 event 2, the laboratory director did not sign the following PT attestation statements: core chemistry, hematology/coagulation, and microbiology.</p>